

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

☒ Original ☐ Supplemental ☐ Substitute ☐ PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Organometallic monoacylalkylphosphines

which is described and claimed in:

- ☒ the attached specification.
- ☐ the specification in U.S. Application No. _____
filed _____ (day/month/year), and as amended on _____ (day/month/year) (if applicable).
- ☐ the specification in International Application No. _____ PCT/
filed _____ (day/month/year)
assigned U.S. Application No. _____ (if applicable), and as amended
- ☐ under PCT Article 19 on _____ (day/month/year) (if applicable)
- ☐ under PCT Article 34 on _____ (day/month/year) (if applicable)
- ☐ and further amended on _____ (day/month/year) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is known by me to be material to the patentability of this application as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America relating to this subject matter having a filing date before that of the application on which priority is claimed:

COUNTRY/REGION (OR PCT)	APPLICATION No.	FILING DATE (day/month/year)	PRIORITY CLAIMED
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Switzerland

1133/00

08/06/00

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. § 119 (e) of any United States provisional application(s) listed below:

APPLICATION NO.

FILING DATE
(day/month/year)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States listed below and, insofar as the application discloses and claims subject matter in addition to that disclosed in the prior copending application, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. APPLICATION
No.

FILING DATE
(day/month/year)

STATUS

<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned

PCT APPLICATION
No.
(designating the U.S.)

INTERNATIONAL
FILING DATE
(day/month/year)

U.S. APPLICATION
No.
(if any)

STATUS

<input type="checkbox"/> Patented
<input type="checkbox"/> Pending
<input type="checkbox"/> Abandoned

I hereby appoint the following attorneys and agents, associated with Customer No. 000324, each of them with full power of substitution, revocation and appointment of associates, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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Address all correspondence associated with Customer No. 000324 to ***Ciba Specialty Chemicals Corporation, Patent Department, 540 White Plains Road, P.O. Box 2005, Tarrytown, NY 10591-9005.***

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's signature

Jean-Pierre Wolf

Date

05/04/01
(day/month/year)

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Inventor's signature

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Post Office Address

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